



Town of Mendon
Board of Health
20 Main Street
Mendon, Massachusetts 01756
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E-mail address boh@mendonma.gov

Application for 10-Day Emergency Beaver or Muskrat Permit

To Be Filled Out By Applicant

Fee (if applicable):\$ _____

Name: _____

Date: _____

Address: _____

Town: _____

Zip Code: _____

Daytime Phone #: () _____

Evening Phone #: () _____

Agent Name: _____
(if applicable)

Phone Number: () _____

Complaint Location:

Is the problem entirely on your property? Yes___ No___ Don't Know___

Note: If the problem does not occur entirely on the applicant's property, consent forms from all other property owners must be obtained.

Type of Complaint: Provide a detailed description of the perceived threat to public health and safety

Under M. G. L. c. 131, s. 80A, an emergency permit authorizes the applicant or his duly authorized agent to immediately remedy the threat to human health and safety by one or more of the following options: (a) the use of conibear or box or cage-type traps for the taking of beaver or muskrat, subject to regulations; (b) the breaching of dams, dikes, bogs or berms; and/or (c) employing any non-lethal management of water-flow devices. The emergency permit will be good for 10 days from the date of issue.

Signature of Applicant: _____

Date: _____

NOTE: Option (b) and/or (c) above require applicant to get conservation commission approval prior to such work in accordance with the wetlands protection act.